Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
FOR			NUMBER FILED		NUMBER 8	NUMBER EXTRA		FEE	ſ	RATE	FEE
BASIC FEE								345.00	OR		690.00
TOTAL CLAIMS 30 r				minus 20	)= * (°)		X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS (  minus 3 =  1							X39=		OR	X78=	258
MULTIPLE DEPENDENT CLAIM PRESENT							+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL	1728
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIN REMAIN AFTE AMENDN	IING :R	34,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	*	Minus	**	=	X\$ 9=		OR	X\$18=	
AME	Independent	*		Minus	***	=	X39=		OR	X78=	
	FIRST PRESE	NIAHON	OF MU	JUIPLE DEP	ENDENT CLAIM		+130=		OR	+260=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Colum			(Column 2)	(Column 3)					
ENT B		CLAIN REMAIN AFTE AMENDI	NING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	*		Minus	**	=	X\$ 9=	į	OR	X\$18=	
AME	Independent	*		Minus	***	=	X39=		OR	X78=	
_	FIRST PRESE	NTATION	OF MU	JLTIPLE DEP	ENDENT CLAIM	1	+130=		OR		
							TOTAL ADDIT. FEE		OR	TOTAL	
		(Colum			(Column 2)	(Column 3)				1	
ENT C		CLAII REMAII AFTI AMENDI	ning Er		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
MON	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
<b>AMENDMENT</b>	Independent	*		Minus	***	=	X39=		OR	X78=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1		<del>                                     </del>
					mn 2, write "0" in c		+130= TOTAL		OR	+260=	
**	If the "Highest Nu If the "Highest Nu	ımber Previ ımber Previ	ously Pa	aid For" IN THIS aid For" IN THI	S SPACE is less th S SPACE is less th Independent) is th	an 20, enter "20." an 3, enter "3."	ADDIT. FEE	L	OR ox in c	ADDIT. FEE	L